State of Colorado

ORGANIZATION AND FUNCTIONS OF HEALTH PLANS AND MEDICAL SERVICES

HEALTH PLANS AND MEDICAL SERVICES

The Manager for Health Plans and Medical Services (HPMS) has overall management and administrative responsibility for Medicaid including the provision of delivery of services, maintaining relations with our Fiscal Agent, and resolving conflicts between the State, Providers, Counties and Recipients. This position must ensure appropriate implementation of all Federal, State and Departmental rules, regulations and procedures. The Manager for HP&MS is a critical team member in the Department's efforts to work with our State Legislature related to finance and policy. The position has personnel management responsibilities for approximately 115 staff members. This Manager provides direct supervision to the Division of Acute and Ambulatory Care, the Division of Long Term Care, the Division of Administration and the Division of Accounting.

Division of Acute and Ambulatory Care

This Division is comprised of on-going programs within Health Plans and Medical Services including rule-making, rate setting, monitoring, program and medical policy formation and interpretation, and provider relations. The Division of Acute and Ambulatory Care also monitors portions of Medicaid-related activities of the Colorado Foundation for Medical Care (the Professional Review Organization) and the Colorado Department of Health. The Division is comprised of the following five sections:

- Colorado Indigent Care Program
- Managed Care
- Policy and Benefit Program
- Reimbursement and Finance
- Program Development

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Division of Long Term Care

This Division is responsible for establishing rates and negotiating contracts for Medicaid nursing home services, providing clarification of rules and regulations regarding all Medicaid long-term care programs, administering programs designed for the elderly, blind, and disabled clients requiring long term care, and creating a cost-effective, comprehensive long term care system in Colorado. This includes rule-making, rate-setting, monitoring, program and medical policy formation and interpretation, and provider relations. The Long Term Care Division has the lead in monitoring the Medicaid-related activities of the Colorado Foundation for Medical Care (Professional Review Organization) and the Colorado Department of Public Health and Environment. This Division is comprised of the following four sections:

- Nursing Facilities
- Community Health Program
- Home Care Allowance and Support Services
- Long Term Care Systems Development

Division of Administration

This Division is responsible for the management of the Medicaid program and the coordination of medical benefits. It is responsible for determining Medicaid eligibility and ensuring the payment of claims. It manages administrative operations on behalf of clients, providers, government and outside agencies. The Division is comprised of the following five sections:

- Third Party Resources
- Surveillance and Utilization Review
- Eligibility and Enrollment
- Decision Support Systems
- Medicaid Management Information System

Division of Accounting

The Division of Accounting under the direction of the Controller of the Department is responsible for the management of the accounting functions of the Department. Those functions include processing payments for all administrative functions receipting in all cash receipts and maintaining accounts receivable records preparing the payroll for all employees interfacing departmental accounting activities with the statewide Colorado Financial Reporting System (COFRS) and preparing departmental financial statements and management reports. This division is also responsible for maintaining fixed asset records and the related fiscal reporting as well as all procurement and contract processing activities.

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